Streptococcal Sore Throat and Scarlet Fever

Streptococcal sore throat (strep throat) and scarlet fever (a strep throat with a rash) are common infections in young children. These illnesses are usually not serious. However, complications such as rheumatic fever or kidney disease may develop if children do not receive proper antibiotic treatment.

CAUSE: Streptococcus bacteria (Group A beta hemolytic strep)

SYMPTOMS: Sudden onset of fever, sore throat, swollen glands, headache,

and abdominal pain. Nausea and vomiting may occur with severe cases. With scarlet fever, a very fine, bright red, raised rough texture rash (feels like sandpaper) is present. A fuzzy white tongue followed by a beefy-red 'strawberry tongue' may occur. The rash appears most often on the neck, chest, inner thigh, and in folds of the armpit, elbow, and groin. Later on, there may be

peeling of the skin on the fingertips and toes.

TRANSMISSION: Person-to-person from nose and throat secretions of infected

persons (those with and without symptoms).

INCUBATION: It usually takes 1 to 3 days from the time a person is exposed

until symptoms develop.

CONTAGIOUS Until at least a full 24 hours after treatment begins and fever is

gone.

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Prevention & Control

PERIOD:

EXCLUSION

- 1. If your child does not appear well or develops a sore throat and other symptoms listed above, keep him/her home and call your physician.
- 2. Diagnosis: Confirmed by identification of strep in the throat, either by throat culture, or by using a rapid test which can provide results the same day.
- 3. Treatment: If the culture if positive, antibiotics taken by mouth may be prescribed. This treatment will help to prevent more serious illness such as rheumatic fever, which can damage the heart valves.

For more information, you or your physician may call the Central District Health Department at 385-5175, or call your local health department.